



**PATENT**  
Attorney Docket No. ZAQ-001  
(104816/159713)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

APPLICANTS: Kersley et al.

SERIAL NUMBER: 10/016,172

ART UNIT: 2144

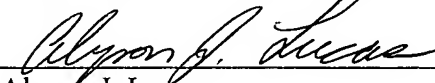
FILING DATE: December 6, 2001

EXAMINER: Pearson, Yvette B.

TITLE: System and Method for Verifying a Device

**CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8**

I hereby certify that this correspondence, and any documents referred to as enclosed herein, are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 10<sup>th</sup> day of November, 2005.

  
Alyson J. Lucas

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Submitted herewith are:

1. Transmittal Form (1 pg.);
2. Change of Correspondence Address (1 pg.);
3. Power of Attorney /Revocation of Prior Powers and New Power of Attorney (1 pg.); and
4. Return Receipt Postcard.



# TRANSMITTAL FORM

Application Serial Number	10/016,172
Filing Date	December 6, 2001
First Named Inventor	Kersley
Group Art Unit	2144
Examiner Name	Pearson, Yvette B.
Attorney Docket No.	ZAQ-001
Patent No.	Not applicable
Issue Date	Not applicable

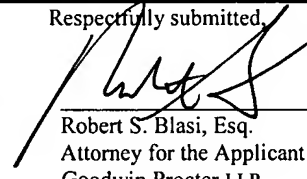
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<input type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets _____]	<input type="checkbox"/> Formal Drawing(s)	<input type="checkbox"/> Appeal Brief (in triplicate)
<input type="checkbox"/> Petition for Extension of Time	<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal	<input type="checkbox"/> Status Inquiry
<input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form PTO-1449	<input checked="" type="checkbox"/> Power of Attorney (Revocation of Prior Powers) (1 pg.)	<input checked="" type="checkbox"/> Return Receipt Postcard
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	<input type="checkbox"/> CD(s) for large table or computer program	<input checked="" type="checkbox"/> Change of Correspondence Address (1 pg.)
	<input type="checkbox"/> Amendment After Allowance	
	<input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	

## CORRESPONDENCE ADDRESS

Direct all correspondence to: Patent Administrator  
Goodwin Procter LLP  
Exchange Place  
Boston, MA 02109  
Tel. No.: (617) 570-1000  
Fax No.: (617) 523-1231  
Customer No. 051414

## SIGNATURE BLOCK

Respectfully submitted,  
  
Date: November 9, 2005  
Reg. No. 50,389  
Tel. No.: (617) 570-1408  
Fax No.: (617) 523-1231  
Robert S. Blasi, Esq.  
Attorney for the Applicant  
Goodwin Procter LLP  
Exchange Place  
Boston, MA 02109